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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2009		Complete if Known	
		Application Number	10/591,436-Conf. #1746
		Filing Date	September 1, 2006
		First Named Inventor	Timo HEINO
		Examiner Name	N. E. Young
		Art Unit	1797
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	
TOTAL AMOUNT OF PAYMENT		(\$ 1,110.00)	

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION																	
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																	
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES												
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)										
Utility	330	165	540	270	220	110	_____										
Design	220	110	100	50	140	70	_____										
Plant	220	110	330	165	170	85	_____										
Reissue	330	165	540	270	650	325	_____										
Provisional	220	110	0	0	0	0	_____										
2. EXCESS CLAIM FEES																	
Fee Description																	
Each claim over 20 (including Reissues) Small Entity Fee (\$) Fee (\$) 52 26																	
Each independent claim over 3 (including Reissues) Fee (\$) Fee (\$) 220 110																	
Multiple dependent claims Fee (\$) Fee (\$) 390 195																	
<table border="1"> <tr> <td>Total Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> <td>Multiple Dependent Claims</td> </tr> <tr> <td>16</td> <td>- 20 = 0</td> <td>x _____</td> <td>= _____</td> <td>Fee (\$) Fee Paid (\$)</td> </tr> </table>								Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	16	- 20 = 0	x _____	= _____	Fee (\$) Fee Paid (\$)
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims													
16	- 20 = 0	x _____	= _____	Fee (\$) Fee Paid (\$)													
HP = highest number of total claims paid for, if greater than 20.																	
<table border="1"> <tr> <td>Indep. Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> <td>Fee (\$) Fee Paid (\$)</td> </tr> <tr> <td>9</td> <td>- 9 = 0</td> <td>x _____</td> <td>= _____</td> <td>Fee (\$) Fee Paid (\$)</td> </tr> </table>								Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$) Fee Paid (\$)	9	- 9 = 0	x _____	= _____	Fee (\$) Fee Paid (\$)
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$) Fee Paid (\$)													
9	- 9 = 0	x _____	= _____	Fee (\$) Fee Paid (\$)													
HP = highest number of independent claims paid for, if greater than 3.																	
3. APPLICATION SIZE FEE																	
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																	
<table border="1"> <tr> <td>Total Sheets</td> <td>Extra Sheets</td> <td>Number of each additional 50 or fraction thereof</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> </tr> <tr> <td>_____</td> <td>- 100 = _____</td> <td>/50 = _____ (round up to a whole number) x _____</td> <td>= _____</td> <td>Fee (\$)</td> </tr> </table>								Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	_____	- 100 = _____	/50 = _____ (round up to a whole number) x _____	= _____	Fee (\$)
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_____	- 100 = _____	/50 = _____ (round up to a whole number) x _____	= _____	Fee (\$)													
4. OTHER FEE(S)																	
Non-English Specification, \$130 fee (no small entity discount)																	
Other (e.g., late filing surcharge): <u>1253 Extension for response within third month</u> Fee (\$) Fee Paid (\$) 1,110.00																	

SUBMITTED BY				
Signature			Registration No. (Attorney/Agent)	32,868
Name (Print/Type)	Andrew D. Meikle		Date	November 4, 2009